



Alzheimer's Disease

CONTENTS

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Preface

xi

Ivo L. Abraham

Cognitive Assessment and Differentiating the 3 Ds (Dementia, Depression, Delirium)

1

Koen Milisen, Tom Braes, Donna M. Fick, and Marquis D. Foreman **23 W.A. 2549**

Differentiation between a diminished or altered cognitive functioning as a consequence of aging and one resulting from serious health problems is critical in the elderly. An unrecognized cognitive disorder or the worsening of the impairment may hamper the effectiveness and appropriateness of care and treatment; therefore, standardized assessment procedures and systematic monitoring of cognition and behavior are important aspects of the nursing care of older adults. In this article, current notions for accurate and comprehensive cognitive assessment in older persons are delineated. Further, an overview of epidemiological screening and diagnostic dilemmas of dementia, depression, and delirium are provided.

Assessment of Psychoemotional and Behavioral Status in Patients with Dementia

23

Lisa L. Onega

Depression and behavioral symptoms occur in many older adults with dementia and result in serious consequences, including nursing home admissions, decreased functional ability, mortality, and increased health care costs. Assessment of depression in this population is challenging and is facilitated by using interviewer-rated instruments as an adjunct to clinical judgment. Clinicians should select a perspective that enables them to view behavioral symptoms associated with dementia in a therapeutic manner. Care for depression and behavioral symptoms should be individualized to match presenting symptoms. Issues related to psychoemotional and behavioral assessment are: (1) implementation of effective psychogeriatric models of care and (2) incorporating evidenced-based knowledge into practice settings.

Abuse and Neglect in Older Adults with Alzheimer's Disease

43

Carla VandeWeerd, Gregory J. Paveza, and Terry Fulmer

Elder mistreatment is a serious issue that affects the lives of thousands of older adults and results in emotional difficulties, such as depression,

feelings of inadequacy, self-loathing, and lowered self-esteem. It has been shown to result in family distress, impaired life functioning, and difficulties with cognition and has been linked to health problems, such as immunologic dysfunction, and increased mortality. As the population ages, and with it the numbers of persons afflicted by diseases such as Alzheimer's, understanding and recognizing elder mistreatment becomes an important factor in maintaining quality of life for older adults.

Application of the Progressively Lowered Stress Threshold Model Across the Continuum of Care

57

Marianne Smith, Geri Richards Hall, Linda Gardner, and Kathleen C. Buckwalter

Over the last two decades, increasing attention has been paid to the nature of behavioral symptoms in dementia. Early notions that all behaviors were an inevitable component of cognitive impairment have all but disappeared in the face of evidence that diverse personal, social, and environmental factors regularly act as antecedents to behavioral and psychologic symptoms of dementia (BPSD). The quality of care provided to persons with dementia has been advanced through nursing care conceptual models that explain antecedents to BPSD and, in turn, offer specific interventions to promote comfort and optimal function.

Alzheimer's Disease: Issues and Challenges in Primary Care

83

Valerie T. Cotter

The challenge in primary care practice is identifying persons with symptoms of Alzheimer's Disease (AD) who often have limited capacity to recognize their own symptoms and attribute cognitive decline to chronic illness or aging. Brief office visit communications without an informant, such as a spouse or adult child rarely uncover mild stage AD. Clinicians in primary care fail to screen older adults for AD on a routine basis because of insufficient time, inadequate reimbursement for services, and uncertainty about the value of an early diagnosis. Although current pharmacologic and behavioral interventions and patient education do not prevent eventual disease progression, they arguably lead to improvements in understanding, self-efficacy, and quality of life for the patient and family.

Measuring the Quality of Nursing Care to Alzheimer's Patients

95

Ivo L. Abraham, Karen M. MacDonald, and Deborah M. Nadzan

Facilities that provide care to Alzheimer's disease patients are under unrelenting pressure to document the quality of nursing care they provide to various stakeholders. Unfortunately, little consensus exists nor is

guidance given as to how to measure the quality of nursing care. Regulations and standards exist but are seldom translated into systematic outcome measures that assist nurses and facilities to measure, report, and manage the quality of care they provide to residents in general and Alzheimer's patients in particular. This article offers practical advice on conceptualizing quality of nursing care to Alzheimer's patients and the selection of outcome measures to collect, analyze, use, and report quality of nursing care data.

Longitudinal Observational Studies to Study the Efficacy-Effectiveness Gap in Drug Therapy: Application to Mild and Moderate Dementia

105

Karen M. MacDonald, Stefaan Vancayzele, Anne Deblander, and Ivo L. Abraham

If well-designed, longitudinal observational studies (LOSs) can provide insights to the linkages between real-world outcomes and their multilevel determinants. In this article, some of the scientific and methodologic issues related to LOSs in pharmacotherapeutic evaluations are discussed. A case of such a study in the treatment of mild to moderate dementia is provided—a case in which a pharmaceutical sponsor addressing a medical question (long-term effectiveness) realized that caring for patients who have Alzheimer's disease involves the clinical community of caregivers, physicians, families, nurses, psychologists, and pharmacists, among others, and partnered with nurse researchers to design their inquiry. The authors conclude by presenting an argument for nurses to take the lead in effectiveness research.

Dementia and Alzheimer's Disease: A Practical Orientation

119

Ivo L. Abraham

This article presents a functional, brief, and, above all, practical orientation to Alzheimer's disease. This disease, with its many unanswered questions (and occasional unquestioned answers), is in first instance a disease to be cared for. The burden of this caring initially falls on caregivers and families; however, once Alzheimer's patients enter the formal health care system, nurses will be at the forefront of care. The foundation to good care is a solid but also applied understanding of the disease, how it manifests itself, and how it is experienced by patients, caregivers, and families.

Erratum

129

Index

131